MRS Eastern Expansion Meeting

August 13, 2004 Wilson Co DSS

Attendees:

<u>State Staff</u>: Tony Troop, Denise Shipman, Carla McNeil, Gale Trevathan, Gwen Byrns, Tony Amos, Diane Chavis, Carl Breazeale, Keith Davis, Renee' Hannah, Heather Thomas.

<u>Counties</u>: Currituck, Duplin, Durham, Gates, Halifax, Harnett, Johnston, Lee, Martin, New Hanover, Pasquotank, Scotland, Wake, Warren, Wilson.

Agenda:

Announcements
Future Meetings
Breakouts for Admin & Line Staff
Where are we with family centered practice?
Top 10 things to do for success

Announcements – General Comments from Tony

- Observed on site visits that sometimes we lose sight of what MRS is and what we are doing. Get so focused on the details that we forget where we want to go, which is Family Centered Practice.
- 6 Principles of Family Centered Practice
 - 1) Everyone deserves respect
 - 2) Everyone needs to be heard
 - 3) Everyone has strengths
 - 4) Judgments can wait
 - 5) Partners share power
 - 6) Partnership is a process
- Comments from some county attorneys have raised concern that they
 may be under the impression that with MRS we have to endanger children
 more before we go to court. This is <u>entirely false</u>. We are doing the same
 things we did before, just approaching families differently.
- Do not have to keep the case open when a family continually shows they cannot care for their children.

Updates from the Division

- Domestic Violence Policy
 - Revised policy coming out in a few weeks.
 - Will be effective 9/1 but counties should not implement until they get training.
 - Includes DV policy itself (16-17 pp.), Resources/Best Practice (45pp), Interview tools (not required).

- The big change is that there is no safety plan with the children because children are not responsible for their safety.
- Meth policy will also be coming out soon
- Some entirely new manual material updates standards in Chapter 8
- Still working on on-line evaluation counties should think about what type of reports they would like
- Anticipate University partner doing evaluation of MRS, no details at this time.
- General Assembly appropriated money for local operations, will first go
 to bring all counties to a 1-12 caseload. According to the latest word
 (from Keith) the rest will go to the 52 MRS counties to achieve 1-10
 caseload and then to bring the other 48 counties into MRS by January
 2006.
- Child & Family Services Reviews they will not be done on MRS
 policy, but instead of existing Chapter 8 policy. The reviews will note
 the failure to meet MRS policy, but county will not be "dinged" for not
 adhering to MRS policy when it differs from regular policy.

Where are we with MRS?

- Family Centered Practice means strength based structured intake.
- Is anyone doing anything at intake that is getting reports to identify strengths?
 - o Have intake workers give examples to callers.
- Family Assessments vs. Forensic Assessments as much as
 possible remember that they are <u>both</u> MRS assessments. All
 cases are MRS; there are just two ways to assign them.
- Have counties begun assigning cases as Family Assessment?

Durham - Yes

- Focusing on lack of supervision cases, implemented countywide.
- Have not really noticed any changes in the family's reactions to workers.

Johnston – Yes

- Started 8/1, 35 cases so far. No case decisions yet.
- Workers excited about it.

Wilson - Yes

- Piloted from December to May, in July went countywide.
- Reorganized agency most anxiety about MRS from workers who had never done 215 before.
- Tony commented that according to feedback from counties it is easier for 215 workers to start 210 than vice versa.

New Hanover - Yes

- Implemented end of February.
- One forensic worker per unit, workers like the new approach.
- Assessment workers keep 215 cases unless they go longer than 6 months, then they go to a specific worker.
- Had to retrain investigators to provide services.

 Having some issues getting clients hooked into services because of the mental health reorganization.

Harnett – Yes

- Started 7/6 with improper care and medical issues
- 8/6 all cases except Domestic Violence which are forensic (maybe 10% of their cases are DV)

Lee - Yes

• 7/1 with all cases, workers love it

Currituck - Yes

- Started in April, by May they were doing 100% of cases, no major adjustments.
- Had to assign one worker to forensic.

Duplin – No

Not quite sure why they haven't implemented yet.

Scotland – No.

- Have not implemented because of staffing issues. Down 50%
- New staff can be a positive since new workers will never have done CPS the "old way", only MRS.

Gates - Yes

- Rolled out in March, love it.
- Can see that it is a positive experience for the families and they are participating and responding more.

Martin - No

Lost all trained staff. Will try to implement on 10/1.

Wake – Yes

- Started 6/1 in 2 of 6 geographic areas. 100% in those areas.
- Will go countywide on December 1.

Halifax – No

 Just getting over a 100% turnover in workers. Put off implementation until January because of state review in November.

Warren - No

• 50% change in staff. Once they have 4 people, they will implement.

Pasquotank – No

- Only recently filled vacancies.
- Previously took too much training too close together and didn't really absorb what they learned.
- However, they are doing some of the parts of MRS (like calling families).

Other Issues

- Documentation how does it look different?
 - Don't see all the separate interviews, more open dialog, more respectful.
 - Tony said that people complain that keeping new records takes too much time. (Gates County said their worker doesn't think so.)

- At the 52 meeting there was some talk about a form Mecklenburg and Buncombe has created that Tony was going to get on the web. He will still do that but because of a personnel change it has been delayed.
- Counties said you have to get folks, especially former 210 workers, to slow down and document services provided.

Assigning cases

- New Hanover have to develop a new rotation system.
- Wake up to each unit how they assign, still transferring 215 to case planning/case mgmt.
- Original 10 had to assign people outside of the regular rotation because when you keep the cases all the way through you end up with too many 215 cases so can't be taking 210 as well.

Case Decision Question

- What if the child is taken out of state to live with a relative? How do you do finding? (Used to substantiate and close.)
- o Consider legal security issues (Chapter 8)
- Durham files for custody on behalf of the relative (if family does not do it on their own). Can use 4E Waiver to pay for this.

Policy Question regarding findings

- Wake County concerned that if you front load services and "fix" some of the issues, your finding will not reflect the original situation.
- Policy at this time is that if at the time of case decision you have provided services and the risk is lowered, the finding will be "Services Not Needed". Working on the 4th finding option.

Contacting Absent Parent

- Question regarding guidelines for contacting an absent parent are there requirements.
- o No written policies, although there are legal issues that require you to have some interaction with a parent not in the home.
- Child Support can tell you about paternity issues.
- Wake County determines the level of involvement of absent parent and then includes them appropriately.

Child & Family Teams

- New Hanover not doing it 100% of the time, contracted with a mediation center to set up meetings, use volunteer outside facilitators.
- Durham none yet, have people within agency that are trained as facilitators.
- Johnston since they just implemented they have not had any yet. Decided to hire a fulltime facilitator.
- Question arose about how much should a facilitator know beforehand? Other counties said they need safety and domestic violence information but otherwise the less they know the better to stay unbiased.

 Who invites the parties to the meeting? Depends on how you have it set up.

MRS Top 10 Things to be Successful – according to Susan Osbourne, Alamance County Director (learned from their implementation).

- 1) Fill all vacancies in Child Welfare before you start.
- 2) Start small not with all neglect cases that fit the definition.
- Do not let Case Planning/Case Mgmt. social workers who are moving to assessment take any cases with them. (In other words, get your 215 cases down.)
 - New Hanover did it be re-examining all cases to determine if they could close. Involved legal to ensure they were covered on questionable issues and the social worker and supervisor talked about all issues.
- 4) Have a well trained facilitator for Child & Family Teams ready before you implement.
 - All of the original 10 say the most change in families happens at these meetings, so be sure not to minimize them. If you handle them right, you will have less work in the long run.
 - They are, however, a lot of work to prepare for. 4-6 hours for preparation and 1-3 hours for the meeting. (according to Wilson)
 - MRS policy says for non-high risk families you don't have to have a facilitator; the social worker can do it. However, from Tony's talking to workers, it is not as effective that way. It is too much for the social worker, and also a conflict of interest.
- 5) Have a discussion and a plan with all staff about flexible work hours.
 - Workers will be working more after hours, because spending more time at visits (although not more total time, just different hours.)
- 6) After the first few MRS Family Assessments, look at documentation and examine how it looks different than Investigative Assessments.
- 7) Solicit input from client families.
- 8) Prepare community for changes MRS will bring.
 - o Will get most resistance from schools and guardian ad litem
- 9) Prepare and train those folks who will be attending Child & Family Team meetings.
- 10) Know that MRS is truly best practice and what is best for families and workers.

Next Meetings

- Will meet here September 13th
- September meeting of the 53 in New Hanover cancelled, but will reschedule in October – watch list serve.